## 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # F9900005868 Sep 13, 2000 8:00 am Secretary of State USP HOLDING II INC. 09-13-2000 90016 018 \*\*\*550.00 Principal Place of Business Mailing Address 1600 AIRPORT FREEWAY, SUITE 208 1600 AIRPORT FREEWAY. SUITE 208 BEDFORD TX 76022 BEDFORD TX 76022 80106233 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #. etc. UITE 300 ITE 300 Applied For City & State City & State 4. FEI Number 75-2811860 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 1)ALLAS Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. CEO Addition ☐ Delete TITLE ☐ Change TITLE PIPERI, ADRIAN SR. NAME NAME STREET ADDRESS STREET ADDRESS 1726 AUGUSTA DRIVE. #104 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77057** ☐ Change ☐ Addition ☐ Delete TITLE NAME BAKER. DENNIS L NAME STREET ADDRESS 1600 AIRPORT FREEWAY, SUITE 208 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BEDFORD TX 76022 ☐ Delete Change ☐ Addition TITLE TITI F FOCKE, SUSAN B NAME NAME STREET ADDRESS STREET ADDRESS 1726 AUGUSTA DRIVE, #104 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77057** Delete TITLE ☐ Change ☐ Addition TITLE BOSCHE, W. KIRK NAME NAME STREET ADDRESS STREET ADDRESS 1600 AIRPORT FREEWAY, SUITE 208 CITY-ST-ZIP CITY-ST-ZIP BEDFORD TX 76022 ☐ Change \_\_\_ Addition ☐ Delete TITLE TITLE PIPERI, ADRIAN NAME NAME STREET ADDRESS STREET ADDRESS 1726 AUGUSTA DRIVE, #104 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77057** Delete Change SAT ☐ Addition TITI F TITLE NAME ANDERSON, BRIAN NAME STREET ADDRESS STREET ADDRESS 1726 AUGUSTA DRIVE, #104 CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. HOUSTON TX 77057

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: